24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
WOMEN SPEAK OUT PAC	C C00530766		
	0 20030700		
Check if X 24-hour report 48-hour report New report Amends report filed	d on M M M / D D / Y Y Y Y Y Y		
Full Name of Payee	Date of Public Distribution/Dissemination		
Campaign HQ	10 30 / Y Y Y Y Y		
Mailing Address PO Box 257	Amount		
City State Zip Code	1997.13		
Brooklyn IA 52211	Transaction ID : SE.23595		
Purpose of Evpanditure	Date of Disbursement or Obligation		
Phone Calls Category/ Type	10 29 / 2020		
Name of Federal Candidate Support Office	ee Sought: House District:		
TRUMP, DONALD J., , ,	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought Disb 2020	oursement For: Primary X General Other (specify) ▶		
Full Name of Payee	Date of Public Distribution/Dissemination		
Campaign HQ	10 30 2020		
Mailing Address PO Box 257	Amount		
City State Zip Code	1997.13		
Brooklyn IA 52211	Transaction ID : SE.23596		
Purpose of Expenditure Category/	Date of Disbursement or Obligation		
Phone Calls Type	10 29 2020		
Name of Federal Candidate Support Office	ce Sought: House District:		
BIDEN, JOSEPH R JR, , ,	President Senate State:		
	pursement For: Primary X General		
Per Election for Office Sought 5724538.13	0 Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	3994.26		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
· Buto	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC	C C00530766
Check if X 24-hour report 48-hour report New report Amend	ds report filed on
Full Name of Payee Campaign HQ	Date of Public Distribution/Dissemination
	10 30 7 2020
Mailing Address PO Box 257	Amount
City State Zip Code	1482.49
Brooklyn IA 52211	Transaction ID : SE.23597 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls Category/ Type	10 / 29 / 2020
Name of Federal Candidate Sup	pport Office Sought: House District:
GRAHAM LINDSEY O	pose President Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 392887.01	Disbursement For: Primary 2020
Full Name of Payee	Date of Public Distribution/Dissemination
Campaign HQ	10 30 / Y Y Y Y Y Y
Mailing Address PO Box 257	Amount
City State Zip Code	1482.49 Transaction ID : SE.23598
Brooklyn IA 52211	Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls Category/ Type	10 / 29 / Y Y Y Y Y Y
·	pport Office Sought: House District:
HARRISON, JAIME, , ,	pose President X Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 394369.50	Disbursement For: Primary ★ General 2020 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 2964.98
(b) SUBTOTAL of Unitemized Independent Expenditures	············ >
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or a party committee) any political party committee or its agent.	•
Gross, Jennifer, , , [Electronically Filed]	Date 10 30 2020
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 3 OF 8 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼	
WOMEN SPEAK OUT PAC		C C00530766	
Check if 24-hour report 48-hour report New report	Amends report filed	on M = M / D = D / Y = Y = Y = Y	
Full Name of Payee		Date of Public Distribution/Dissemination	
Campaign HQ		10 30 / 2020	
Mailing Address PO Box 257		Amount	
City State Zip	Code	514.62	
1 ·	211	Transaction ID : SE.23599 Date of Disbursement or Obligation	
Purpose of Expenditure Phone Calls	ategory/ Type	10 / 29 / 2020	
Name of Federal Candidate	✗ Support Office	Sought: House District:	
ERNST, JONI K, , ,	Oppose	President Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought 25	Disbut 58258.17 Disbut 2020	rsement For: Primary	
Full Name of Payee		Date of Public Distribution/Dissemination	
Campaign HQ		10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 257		Amount	
City State Zip	Code	514.62	
,	2211	Transaction ID : SE.23600 Date of Disbursement or Obligation	
Purpose of Expenditure Phone Calls	ategory/ Type	10 29 7 2020	
Name of Federal Candidate	Support Office	Sought: House District:	
GREENFIELD, THERESA, , ,	X Oppose	President Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought 25	Disbu 2020	rsement For: Primary General Other (specify) General	
(a) SUBTOTAL of Itemized Independent Expenditures		1029.24	
(b) SUBTOTAL of Unitemized Independent Expenditures	····	7 7 7	
(c) TOTAL Independent Expenditures	······		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gross, Jennifer, , , [Electronicall] Signature	ly Filed] Date 10	0 30 / 2020	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	IVI EXI END	TOTILO		PAGE 4 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C00530766
Check if 24-hour report 48-hour report	X New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee Campaign Inbox	<u>/</u>		Date of I	
Mailing Address 601 New Jersey Ave NW	-		Amount	29 2020
Suite 400				
City Washington	State DC	Zip Code 20001		1750.00 tion ID : SE.23619 Disbursement or Obligation
Purpose of Expenditure Email Communication (estimate)		Category/ Type	Date of 1	M / D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
BIDEN, JOSEPH R JR, , ,		X Oppose	✗ President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		5726288.13	Disbursement F 2020 Othe	or: Primary X General er (specify) ▶
Full Name of Payee Campaign Inbox Mailing Address 601 New Jersey Ave NW			Date of	
601 New Jersey Ave NW Suite 400			Amount	
City	State	Zip Code		218.75
Washington	DC	20001		on ID : SE.23620 Disbursement or Obligation
Purpose of Expenditure Email Communication (estimate)		Category/ Type	10	
Name of Federal Candidate		x Support	Office Sought:	₩ House District:07
HUNT, WESLEY, , ,		Oppose	President	
Calendar Year-To-Date Per Election for Office Sought		403065.34	Disbursement F 2020 Othe	For: Primary General er (specify)
(a) SUBTOTAL of Itemized Independent Expendit	ures			1968.75
(b) SUBTOTAL of Unitemized Independent Expen	nditures		-	7
(c) TOTAL Independent Expenditures			· •	47 1 1 47 1 1 45 1
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authorize			
Gross, Jennifer, , ,	[Electron	nically Filed] Date		30 2020
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
WOMEN SPEAK OUT PAC	C C00530766		
Check if X 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayaya		
Full Name of Payee Campaign Inbox	Date of Public Distribution/Dissemination		
	10 29 2020		
Mailing Address 601 New Jersey Ave NW	Amount		
Suite 400			
City State Zip Code Washington DC 20001	218.75 Transaction ID : SE.23621		
	Date of Disbursement or Obligation		
Purpose of Expenditure Email Communication (estimate) Category/ Type	10 29 / Y Y Y Y Y		
Name of Federal Candidate Support Office	e Sought: X House District: 39		
KIM, YOUNG, , ,	President Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought Disb 218.75	ursement For: Primary		
Full Name of Payee	Date of Public Distribution/Dissemination		
Campaign Inbox	M = M / D = D / Y = Y = Y		
Mailing Address 601 New Jersey Ave NW	10 29 2020		
Suite 400	Amount		
City State Zip Code	218.75		
Washington DC 20001	Transaction ID : SE.23622 Date of Disbursement or Obligation		
Purpose of Expenditure Email Communication (estimate) Category/ Type	10 29 / 2020		
Туре	10 23 2020		
	te Sought: House District: 03		
BOEBERT, LAUREN, , , Oppose	President Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought Disb 2020	oursement For: Primary General Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	437.50		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
WOMEN SPEAK OUT PAC	C C00530766			
Check if X 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay			
Full Name of Payee Campaign Inbox	Date of Public Distribution/Dissemination			
	10 29 2020			
Mailing Address 601 New Jersey Ave NW	Amount			
Suite 400				
City State Zip Code Washington DC 20001	218.75 Transaction ID : SE.23623			
	Date of Disbursement or Obligation			
Purpose of Expenditure Email Communication (estimate) Category/ Type	10 29 / Y Y Y Y Y			
Name of Federal Candidate Support Office	Sought: House District: 13			
PAULINA LUNA, ANNA, , ,	President Senate State: FL			
Odiolidai 16di 16 Bato	rsement For: Primary 🗶 General			
Per Election for Office Sought 218.75 2020	Other (specify) ▶			
Full Name of Payee Campaign Inbox	Date of Public Distribution/Dissemination			
Campaign mbox	10 29 2020			
Mailing Address 601 New Jersey Ave NW	Amount			
Suite 400				
City State Zip Code Washington DC 20001	218.75 Transaction ID : SE.23624			
	Date of Disbursement or Obligation			
Purpose of Expenditure Email Communication (estimate) Category/ Type	10 29 / 2020			
Name of Federal Candidate Support Office	e Sought: 🗶 House District:03			
MEIJER, PETER MR., , , Oppose	President Senate State: MI			
Calendar Year-To-Date Per Election for Office Sought Disbut 218.75	ursement For: Primary General Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	437.50			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
	0 30 2020			
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	EXI ENDI	101120				PAGE 7 OF FOR SE OF FORM 24/4	8 18
NAME OF COMMITTEE (In Full)					FEC II	DENTIFICATION NUMBE	
WOMEN SPEAK OUT PAC					С	C00530766	
Check if 24-hour report 48-hour report	X New repo	ort Am	nends repo	ort filed on	M = M	/ D D / Y Y Y	Y
Full Name of Payee Campaign Inbox				Date	M M	c Distribution/Dissemination	
Mailing Address 601 New Jersey Ave NW				Amo	10 unt	29 2020	_
Suite 400	<u> </u>	7: 0 1					
City Washington	State DC	Zip Code 20001				218.75 ID: SE.23625 ursement or Obligation	·
Purpose of Expenditure Email Communication (estimate)		Category/ Type			M 10	/ 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y
Name of Federal Candidate		x	Support	Office Soug	ıht:	X House District:	07
MCCORMICK, RICHARD DEAN DR., , ,			Oppose	Presi		Senate State: G	iΑ
Calendar Year-To-Date Per Election for Office Sought	, , ,	218.75		Disburseme		Primary X Ger	neral
Full Name of Payee				Date	of Publ	ic Distribution/Disseminati	on
Campaign Inbox					M M M	/ 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y
Mailing Address 601 New Jersey Ave NW				Amo	unt		
Suite 400				Aine	, and		-
City	State	Zip Code				218.75	5
Washington	DC	20001				D : SE.23626 ursement or Obligation	
Purpose of Expenditure Email Communication (estimate)		Category/ Type			10 10	29 / 2020	Y
Name of Federal Candidate		×	Support	Office Sou	ght:	★ House District:	06
IVES, JEANNE, , ,			Oppose	Presi	dent [Senate State:	<u>L</u>
Calendar Year-To-Date Per Election for Office Sought		218.75		Disburseme 2020		Primary X Ger	neral
							_
(a) SUBTOTAL of Itemized Independent Expenditures	}			•		437.50	
(b) SUBTOTAL of Unitemized Independent Expenditu	res		••••••	•			
(c) TOTAL Independent Expenditures				•		1 2 1 2	
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized						
Gross, Jennifer, , ,	[Electroni	ically Filed]	Date	M M M	30	2020	
Signature							

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

S	chedule E)	PAGE 8 OF 8 FOR SE OF FORM 24/48
	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
٧	VOMEN SPEAK OUT PAC	C C00530766
Ch	neck if X 24-hour report 48-hour report New report Amends report fi	led on Mam / Dab / Yayayay
_	Full Name of Payee	Date of Public Distribution/Dissemination
	Campaign Inbox	10 29 2020
	Mailing Address 601 New Jersey Ave NW Suite 400	Amount
	City State Zip Code	240.75
	Washington DC 20001	218.75 Transaction ID : SE.23627 Date of Disbursement or Obligation
	Purpose of Expenditure Email Communication (estimate) Category/ Type	10 / 29 / Y 2020
	Name of Federal Candidate Support Of	ffice Sought:
	HAGAN, CHRISTINA, , ,	President Senate State: OH
		sbursement For: Primary General 20 Gther (specify) ▶
	Full Name of Payee	Date of Public Distribution/Dissemination
	Mailing Address	Amount
	City State Zip Code	
		Date of Disbursement or Obligation
	Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
		ffice Sought: House District:
	Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	isbursement For:
_		
	(a) SUBTOTAL of Itemized Independent Expenditures	218.75
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	11488.48
	Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eiparty committee) any political party committee or its agent.	
	Gross, Jennifer, , , [Electronically Filed] Date	10 30 2020